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Remarks  
on  
the Epidemic  
as it occurred  
in Chambersburg.

By

George A. Heth

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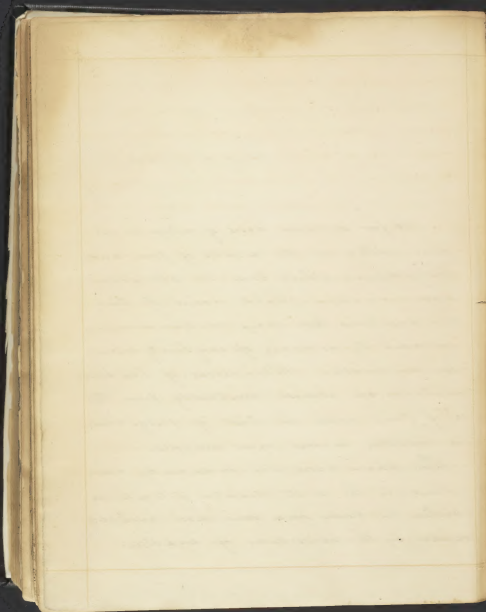
Pennsylvania

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A few sporadic cases of intermittent fever existed in the months of June and July, during which time the atmosphere was variable. Cold rains of two and sometimes three days continuance, were succeeded by as many of excessively warm and dry weather. Altitudes of this kind were kept up almost constantly from the 12<sup>th</sup> of June until the last of July, when the weather became more uniform.

The above cases were exclusively confined to the most elevated situations within the town, and were most probably excited by the vicissitudes of weather.



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With August the weather set in very warm, and continued so until the 7<sup>th</sup> of September being, however, occasionally interrupted by a slight shower of rain.

On the seventh of September the atmosphere became foggy, which, with frequent rains, continued until the 18<sup>th</sup>.

From the drought experienced in August, the water within the banks of the Canacochague, which has its course through Chamberburg, was greatly exhausted; so much so, as to leave exposed in many places its bed, which was thickly covered with mud.

By the exposure of these places to the action of the sun, for several successive days together, there was evolved the miasmata which obviously gave rise to the disease, which forms the subject of this essay.

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This disease assumed the character of  
intermittents and remittents, in about  
the proportion of four of the former to  
one of the latter.

It originated about the beginning of  
August in the miasmatic districts, within  
the immediate vicinity of the Canacochagua,  
and in those places where its seed was  
first exposed, thence rapidly extending,  
until the middle of the month, when  
it might be said to have been pretty  
general.

Few families escaped the disease, which  
attacked equally all classes of society.  
Indeed whole families, some of which  
consisted of as many as ten persons,  
were attacked without the exception  
of a single member.

On the first approach of the inter-  
mittent form of the disease, which

The account of the journey is given in  
the first part of the book. The author  
describes the route from London to  
the north of England, and the various  
scenery and people he met. He also  
gives a detailed account of the journey  
from London to the north of England,  
and the various scenery and people he met.  
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which assumed the bilious or quotidian type; the patient, as is usual, complained of debility, accompanied with violent head-ach, loss of appetite, and disordered stomach.

By the last symptom vomiting was often spontaneously excited, soon after which there was a manifest abatement of all the preceding symptoms.

Many of those, who experienced so much relief from spontaneous vomiting, and who had previously called in medical aid, now refused to receive any attendance, being under the impression that their disease was entirely eradicated.

This calm, however, was of short duration. The lapse of time in no one instance, which came within my observation, amounted to more than 48 hours, which was the most common

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common reason for the accession of the  
paroxysm, when those who had but one  
refused, now earnestly desired relief.

Those cases in which nausea did not  
induce vomiting were more violent, for  
after this last symptom, the patient next  
complained of a cold, creeping sensation,  
first between his shoulders, then extending  
over his whole body, and which in many  
instances amounted to a complete shivering.  
This, which is called the cold stage of a  
paroxysm of intermittent fever, generally,  
lasted from one to two hours.

In this stage the pulse was small, irregu-  
lar, and frequent. The distress of stomach  
and headach much increased. The face  
pale. The skin having the appearance  
of tightly binding. The whole frame.  
The lips and nails of a quite bluish  
cast. This stage, as before observed,

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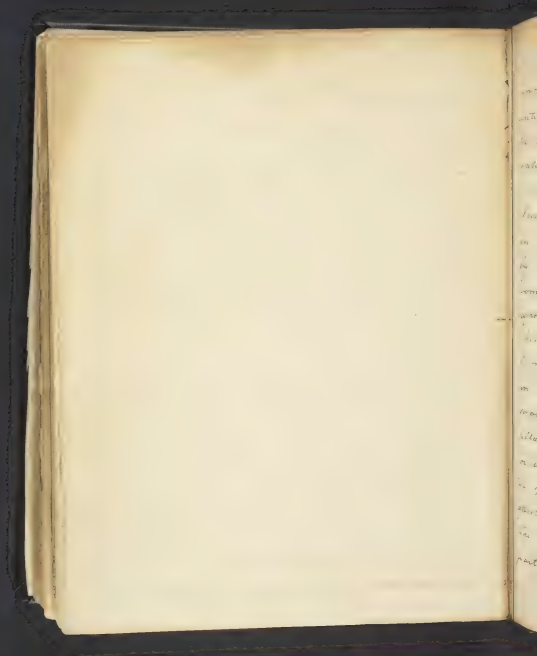
diminished, continuing from one to two hours, gradually subsided and gave room for the heat.

In this stage the pulse was full, hard and more regular. The headache was still more increased but the distress of stomach somewhat abated.

The face was flushed and the skin relaxed. The lips and nails resumed their natural colour.

In persons of a rathion habit, there was much confusion of ideas which frequently arose to delirium. This stage continuing generally from two to three hours, gradually gave way to the sweating stage, which was ushered in by copious perspiration.

When the sweat had flowed for some time, these symptoms all subsided, leaving the patient well enough.



enough to resume their occupations  
until involved by another, secondary,  
in symptoms of which were a complete  
repetition of those already described.

Seeing that the disease was seated  
in the stomach, which was evinced  
by the relief obtained from spontaneous  
vomiting, the first indication looked  
upon was that of cleansing thoroughly  
this organ; and for this purpose the  
Emetic Tartar was selected and given  
in the ordinary way, until vomiting  
was fully excited. When this was  
attained large draughts of tepid water  
or weak tea were swallowed, by which  
the operation of the medicine was much  
obviated.

The matter thrown up was for the most  
part, of a stony consistence, and evidently

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suddenly discoloured with bile.

~~~~~ An emetic  
taken ~~shortly~~ shortly before an expected  
paroxysm sometimes entirely prevented its  
recurrence, and always rendered it much  
lighter.

To cleanse more thoroughly the  
Alimentary canal, and fully to prepare  
the system for the bark, a purgative  
was not administered which was  
found absolutely necessary before  
the bark could be retained with any  
degree of certainty. For this purpose  
ten grs of Calomel with twenty of Jalap  
or what answered equally well, the  
same quantity of Pod. Pellatum were  
given to an adult. This seldom failed  
to evacuate the bowels sufficiently, though  
cases did occur when from extreme  
torpor of the Alimentary canal a

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A repetition of this dose followed by an  
absence of Sulph. Magnesia was not more  
than adequate to this end.

These means were employed in the  
intermission as well as the hours which  
was next given in doses of  $\mathfrak{z}\mathfrak{i}$  every  
two hours, this being generally as much  
as the stomach would retain.

When from irritability of stomach the  
Lark was rejected, the addition of  $\mathfrak{z}\mathfrak{i}$   
of Carbon: Potassa to  $\mathfrak{z}\mathfrak{i}$  of Lark gen-  
erally obviated that effect.

When the Lark had the effect of induc-  
ing costiveness there were added to the  
same preparation  $\mathfrak{z}\mathfrak{i}$  of the Bitart. Potassa  
and when it had the contrary effect  
a few drops of Citric Acid were given  
with each dose.

Previous however to the exhibition of  
emetics to those of a full habit of body

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body there were taken, from the arm  
12 or 15 ounces of blood.

Arsenic though not through choice  
was given to some of the lower class  
of society, who were entirely opposed  
to taking the bark from its producing  
as this said, "pains in the bones that  
stick their veins". It was administered  
in the form of a saturated solution  
in doses of 10 drops three times a day.

This medicine although it checked a  
majority of the cases in which it was  
prescribed, proved to be decidedly in-  
ferior to the bark.

The treatment of children consisted  
in vomiting with the emetic, purging  
with Cal: & Ather and substituting for  
the bark the Arsenical solution, which  
was thought better adapted to their cases  
being at the same time more conveniently taken

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lotion.

When the Arsenical Solut<sup>n</sup> failed to put an end to the disease a decoction of bark was given which promptly checked it.

Comparatively few cases resisted this plan of treatment when strictly adhered to.

However when these means failed to prevent a recurrence of the paroxysm a pill containing two grs of opium and one of Hyoscyamus was given to an adult on the approach of the cold stage, which evidently shortened its duration and did not perceptibly increase the hot stage which was at first anticipated. During the hot stage a powder containing ten grs of Pil. Detaraxa and one sixth of a grain of Emetic tartar was given every two hours by which its duration was

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was also shortened.

During the intermission the work being resumed and continued for a few days, never failed to check the disease.

The remittent form of the disease at its onset was marked by the same symptoms as that of the intermittent, viz. debility, headache, loss of appetite, and nausea of stomach. When these had continued for a day or two the patient experienced a coldness of his whole frame particularly of his extremities. This lasted generally not more than an hour, after which the previous symptoms were greatly aggravated. Vomiting soon took place which in many instances was truly bilious. But after continuing for some days it became bloody.

This was the course the disease usually

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resumed when left to nature, and it not unfrequently happened that it had arrived to this pitch before medical aid was applied for.

Call<sup>d</sup> on at this stage of the disease the pulse was found for the most part full, hard, and frequent. Blood was first taken from the arm to the extent of sixteen ounces next to this, Antispasmodics were given to calm irritability, of Stomach Those which were found most efficacious were either old pills of opium given at intervals of one hour, or equal portions of lime water and sweet milk of which a table spoonful was given and frequently repeated, or of the Rx below a tea spoonful was taken after every effort to vomit. Rx Carbon Solap. - of

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| Ess. Mint. Popm | 3j |
| Aqua Font.      | 3j |

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When one of these failed another was tried, and generally with the happiest effect. When all these remedies failed to check the vomiting which was very seldom the case, a sinapium applied on the Epigastrie region was invariably found successful.

The irritability of stomach being now allayed, and fearful that Emetics although still indicated might induce a fatal Hamatemesis, ten grains of Calomel with fifteen of Salap were next given and frequently without any effect whatever.

Extreme torpor of the bowels rendered it necessary to repeat this dose every two hours.

In as many as five or six cases all of which were females I witnessed this dose given and repeated three

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three times before the slightest purgative effect was experienced.

A sudorific powder was now given & repeated every two hours until a remission took place, when a preparation of Sack the same as that used in the Intermittent form of the disease was given every ~~two~~ <sup>two</sup> hours in as large doses as the Stomach would retain.

This plan of treatment being vigorously persevered in, very few cases were protracted beyond the third remission. The disease being ~~early~~ attacked early in its commencement, and before it had advanced to the stage first described was much less troublesome and uniformly gave way to the following remedies. Evacuation when indicated by the pulse or a fullness and throbbing of the temporal arteries,

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arteries accompanied with violent pain  
in the head.

This was succeeded by an Emetic and  
cathartic, the last of which as already  
observed was repeated as often as two  
and three times before purging so as ex-  
-cited Sudorifics while the fever contin-  
-ued and a combination of Bark and  
Virginia Snake root during the remissions.

These comprised the whole of the  
remedies that were found necessary  
to effect a speedy cure, and not in  
a solitary instance did I know the  
disease to resist this mode of  
treatment.

This disease was not confined  
to Chambersburg alone, but was so  
far as could be ascertained  
diffused throughout Franklin County  
of which it is the Capital.

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To quote the authority of some of the oldest and most respectable inhabitants of Chambersburg, it prevailed to a greater extent than it ever has within their recollection; even more so than in 1804, and the number of deaths also exceeded those of that time. That the disease was fatal in very many instances is unquestionably true, but it is equally true that it did not prove so in consequence of any incurable nature in it.

It is believed that all the deaths that occurred during the prevalence of the disease, took place in consequence of their being either entirely entrusted to nature, or not interfered with until they had run into a comatose state from which it was sometimes impossible to arouse the patients.

1848. The following is a list of the  
names of the persons who have been  
admitted to the membership of the  
Society since the last meeting.  
The names are given in the order  
in which they were admitted.  
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